THERE ARE MANY MYTHS ABOUT AGING. ONE OF THE WORST IS
THAT YOU CLING TO YOUR HEALTH UNTIL YOUR 65TH BIRTHDAY,
AND THEN YOU SUDDENLY SLIDE DOWNHILL ON THE OTHER
SIDE.

THAT SIMPLY IS NOT TRUE.

YOU CAN LIVE IN GOOD HEALTH ON A PLATEAU, NOT GOING DOWNHILL UNTIL THE VERY END.

NOW WE UNDERSTAND THAT THERE IS SOMETHING, MEDICALLY SPEAKING, AS A DISEASE-FREE AGING PROCESS.

YOU DON'T HAVE TO GIVE UP ON LIVING AT 65, AND SNOOZE IN A ROCKING CHAIR.

TODAY THE AVERAGE 65 YEAR-OLD CAN LOOK FORWARD TO LIVING ANOTHER 17 YEARS.

YEARS AFTER 65 OF THEIR VALUE.

TOO MANY OLDER AMERICANS WITHDRAW INTO INACTIVITY,

THEN THEY FIND THEMSELVES DEPRESSED, AND PLAGUED WITH

POOR HEALTH.

GROWING OLD DOES NOT NECESSARILY MEAN GETTING SICK.

AGING HAS SPECIAL MEANING FOR ME. YOU MAY RECALL THAT, WHEN PRESIDENT REAGAN FIRST NOMINATED ME TO BE HIS SURGEON GENERAL, BACK IN 1981, A GREAT HUE AND CRY WENT UP THAT I WAS TOO OLD.

I WAS JUST A YOUNGSTER OF 65.

BUT ALL MY CRITICS SAID THAT 65 WAS THE AGE AT WHICH
SURGEONS GENERAL WERE SUPPOSED TO LEAVE THE PUBLIC
HEALTH SERVICE ... NOT ENTER IT FOR THE FIRST TIME.
OF COURSE, THIS DID NOT SIT VERY WELL WITH THE MAN WHO
NOMINATED ME. PRESIDENT REAGAN HAD JUST CELEBRATED
HIS 70TH BIRTHDAY AND DID NOT TAKE KINDLY TO THE IDEA
THAT SOMEONE 5 YEARS HIS JUNIOR WAS TOO OLD FOR PUBLIC
SERVICE.

NOW, IN MY 75TH YEAR, I AM SURELY QUALIFIED TO BE COUNTED AS ONE OF AMERICA'S SENIOR CITIZENS. AND I'M VERY PROUD TO BE AMONG THAT COMPANY.

THERE ARE MORE OF US EVERY DAY. IN, SAY, 15 OR 20 YEARS -- A
SUBSTANTIAL PORTION OF THE AMERICAN POPULATION, CLOSE
TO 20 PERCENT, WILL BE OVER THE AGE OF 65.

AND WITHIN THAT GROUP, THE FASTEST-GROWING SEGMENT WILL BE THAT OF PERSONS WHO ARE AGE <u>85 OR</u> ABOVE.

OLDER AMERICANS ARE A GREAT NATURAL RESOURCE. THEY
OFFER SOCIETY WHAT IT SO OFTEN NEEDS THE MOST: COMMON
SENSE AND WISDOM.

SO, WHETHER YOU'RE 20 OR 30 OR 40 OR 50 OR 60, IF YOU DON'T WANT TO WAIT IN LINE IN THE FUTURE FOR RATIONED HEALTHCARE, TAKE CARE OF YOURSELF NOW.

THE PRESCRIPTION IS SIMPLE:

NO SMOKING,

ALCOHOL ONLY IN MODERATION,

EXERCISE AND DIET APPROPRIATE TO AGE,

CHECK BLOOD PRESSURE AND CHOLESTEROL, AND SEE THE

DOCTOR IF THEY ARE ABNORMAL; FOLLOW YOUR DOCTORS

ADVICE.

FORTUNATELY SOME OF US OLDER FOLKS MUST HAVE GOOD GENES, BECAUSE WE'VE LIVED SO MANY YEARS BEFORE THESE HELPFUL HEALTH WARNINGS. WE'VE EATEN FAR TOO MUCH LARD, NEVER JOGGED UNLESS WE WERE LATE FOR A TRAIN, THOUGHT FIBER WAS PART OF CLOTHING NOT DIET, AND WE'VE MADE IT TO OLD-AGE.

OF COURSE, IF WE'D KNOWN WE'D LIVE SO LONG, WE'D HAVE TAKEN BETTER CARE OF OURSELVES.

BUT I'VE DECIDED THAT BIRTHDAYS ARE GOOD FOR YOU.

THE PEOPLE WHO HAVE THE MOST OF THEM LIVE LONGEST.

[COUPLE WHO WENT TO HEAVEN.....OAT BRAN]

BUT AGE PREJUDICE IS STILL FAR TOO COMMON IN AMERICA.

FORTUNATELY THERE ARE MORE AND MORE PEOPLE WHO ARE

DEFYING THE STEREOTYPE OF THE IDLE ELDERLY, AND THEY

CONTINUE TO LIVE LIFE FULLY UNTIL THE DAY THEY DIE.

AND YES, WE SHOULD TALK ABOUT THAT, THE DAY WE DIE.

SOMETIMES I THINK AMERICANS HAVE FORGOTTEN THEY HAVE TO DIE OF SOMETHING.

THE MIRACLES OF MODERN MEDICINE MAY TEMPT US TO WORSHIP AT THE ALTAR OF "LIFE AT ALL COST."

BUT NOW, I BELIEVE THE PUBLIC WONDERS IF MEDICAL TECHNOLOGY MIGHT BE A MIXED BLESSING.

BOTH THE LAY PUBLIC AND THE MEDICAL PROFESSION ARE EVEN
NOW DEBATING THE WISDOM OF USING SO-CALLED
"EXTRAORDINARY" MEASURES TO SAVE OR PROLONG THE LIVES
OF PERSONS PROFOUNDLY TRAUMATIZED OR TERMINALLY ILL.

FOR MANY PEOPLE WHO MUST DECIDE THE FATE OF LOVED ONES, HIGH-TECH MEDICINE SOMETIMES ACTS LIKE A FRIEND ... AND SOMETIMES IT ACTS LIKE AN ENEMY.

HENCE, SOME PEOPLE ARE TURNING TO LEGAL INSTRUMENTS
LIKE THE SO-CALLED "LIVING WILL" AND THE "DURABLE POWER
OF ATTORNEY" TO PROTECT THEMSELVES FROM RUNAWAY
MEDICAL TECHNOLOGY, IN THE EVENT THEY ONE DAY HAVE A
TERMINAL ILLNESS OR INJURY.

ON THE OTHER HAND, WE MUST BE WARY OF THOSE WHO ARE
TOO WILLING TO END THE LIVES OF THE ELDERLY AND THE ILL.
IF WE EVER DECIDE THAT A POOR QUALITY OF LIFE JUSTIFIES
ENDING THAT LIFE, WE HAVE TAKEN A STEP DOWN A SLIPPERY
SLOPE THAT PLACES ALL OF US IN DANGER. THERE IS A
DIFFERENCE BETWEEN ALLOWING NATURE TO TAKE IT COURSE,
AND ACTIVELY ASSISTING DEATH.

MEDICINE CANNOT BE OUR HEALER AND OUR KILLER.

IN OUR SOCIETY WE SHY AWAY EVEN FROM TALKING ABOUT DEATH.

WE NEED TO BE MORE REALISTIC.

PART OF LIVING IS PREPARING FOR DEATH.

AS THE WRITER OF ECCLESIASTES WROTE, "THERE IS A TIME TO BE BORN; THERE IS A TIME TO DIE."

AS DR. TIM JOHNSON HAS WRITTEN, THERE HAS ALWAYS BEEN AN ELEMENT OF TENSION OR PARADOX IN OUR VIEW OF LIFE, CONDITIONED BY OUR JUDEO-CHRISTIAN HERITAGE.

WE CHERISH LIFE, AND DO ALL WE CAN TO SUSTAIN IT, BUT THEN THERE COMES THE TIME TO DIEAND OUR SPIRITUAL HERITAGE REMINDS US THAT WE SHOULD NOT EQUATE BEING TERMINALLY ILL WITH BEING HOPELESSLY ILL.

FOR ME, MY CHRISTIAN FAITH ALLOWS ME TO FACE DEATH WITH REALISM AND EVEN OPTIMISM. RESOURCES OF THE SPIRIT DO THE SAME FOR OTHERS.

MANY PEOPLE HAVE FOUND STRENGTH AND AN OUTLET FOR SERVICE IN THE GROWING HOSPICE MOVEMENT.

AS THE AMERICAN POPULATION AGES, THESE ISSUES WILL GROW IN IMPORTANCE.

WE MUST KEEP OUR ELDERLY FOLK LIVING AS WELL AS THEY
CAN UNTIL THEY DIE, AND THEN ASSURE THEM --AND
OURSELVES-- OF A DEATH AS FREE OF PAIN AS POSSIBLE, AMONG
FRIENDS, A DEATH WITH SERENITY.

BUT MAYBE SOME OF YOU HAVE THOUGHT ABOUT AGING.

I'M SURE THAT SOME OF YOU HAVE THOUGHT ABOUT YOUR

PARENTS, AND YOU WONDER WHO WILL LOOK AFTER THEM

WHEN THEY ARE OLD AND SICK.

YOU CAN'T STOP THEIR AGING, BUT YOU CAN HELP THEIR HEALTH.

NOW WE KNOW HOW TO PREVENT MANY DISEASES AND
DISABILITIES THAT DENY OLDER PEOPLE THEIR INDEPENDENCE.

FOR EXAMPLE, THERE ARE THREE COMMON ONE-WAY TICKETS
TO A NURSING HOME:

BROKEN HIPS, URINARY INCONTINENCE, AND A DIABETIC FOOT.

EACH OF THESE CAN BE EASILY PREVENTED, GIVING OLDER
PEOPLE MORE YEARS OF INDEPENDENT LIVING.

SO LET'S GET A FEW THINGS STRAIGHT:

GRAY OR WHITE HAIR IS NOT A SIGN OF DISEASE.

NEVER HAS BEEN. NEVER WILL BE.

DRY SKIN IS A NATURAL PHENOMENON OF AGING. WE DON'T KNOW WHY IT HAPPENS ... BUT IT'S NOT THE RESULT OF DISEASE.

TAKING THINGS A LITTLE EASIER IS <u>NOT</u> A DISEASE CONDITION.

IT'S MORE LIKE A SIGN OF MATURITY.

AND GETTING A STRONGER PRESCRIPTION FOR YOUR

EYEGLASSES OR BEING FITTED FOR A HEARING AID IS NOT

EVIDENCE THAT YOU HAVE ONE FOOT IN THE GRAVE.

IT JUST ISN'T.

AFTER SEVERAL YEARS IN WASHINGTON I WAS BEGINNING TO FEEL MORE COMFORTABLE WITH THE JOB. I BEGAN TO LIKE MORE PEOPLE IN THE CONGRESS, AND ACTUALLY ENJOYED COMMITTEE MEETINGS AT THE WHITE HOUSE.

SUDDENLY I REALIZED WHY: I WAS LOSING MY HEARING.

SERIOUSLY, THOUGH, I REALIZED THAT I WAS MISSING A LOT.

AND I WAS MAKING INAPPROPRIATE RESPONSES.

SO I GOT TWO HEARING AIDS.

GETTING A HEARING AID SHOULD BE JUST LIKE GETTING EYEGLASSES.

I'M SURE AIDS IS NOT A NEW TOPIC FOR ANYONE IN THIS ROOM.

AFTER ALL I WROTE EACH OF YOU A LETTER ABOUT AIDS TWO

YEARS AGO. AT LEAST I SENT THE AIDS MAILER TO 107 MILLION

HOUSEHOLDS. I HOPE YOU RECEIVED YOURS.

AND YET I'M SURE THERE ARE STILL MANY PEOPLE RIGHT HERE
IN THIS AUDIENCE WHO ARE STILL UNCLEAR ABOUT THE NATURE
OF THE DISEASE OF AIDS.

YOU MAY RECALL THAT, IN 1981, THE U.S. PUBLIC HEALTH
SERVICE PUBLISHED THE FIRST REPORTS OF WHAT WAS TO
BECOME THE AIDS EPIDEMIC. THEY CONCERNED 5 "PREVIOUSLY
HEALTHY" HOMOSEXUALS WHO WERE ADMITTED TO LOS
ANGELES HOSPITALS WITH PNEUMOCYSTIS CARINII PNEUMONIA,
A VERY RARE FORM OF PNEUMONIA.

BY THE TIME THE REPORT HAD BEEN PUBLISHED, 2 OF THE MEN HAD DIED. THE OTHER 3 DIED SHORTLY THEREAFTER.

THEN, A MONTH LATER, THE PUBLIC HEALTH SERVICE

PUBLISHED A REPORT THAT 26 YOUNG MEN HAD BEEN RECENTLY

DIAGNOSED AS HAVING KAPOSI'S SARCOMA, "AN UNCOMMONLY

REPORTED" CANCEROUS CONDITION USUALLY FOUND IF AT ALL

AMONG ELDERLY MEN.

FROM THAT SMALL BEGINNING THE CASES MUSHROOMED INTO THE EPIDEMIC OF THE LATE 1980S.

THE FIRST THING TO KNOW IS THAT THE AIDS VIRUS IS STILL SPREADING, BOTH IN OUR COUNTRY AND WORLDWIDE.

THAT'S THE PREMISE FOR EVERYTHING WE DO. WE'VE GOT A KILLER DISEASE ON OUR HANDS AND IT'S REACHING FARTHER AND DEEPER INTO OUR SOCIETY EVERY DAY.

OUR STATISTICIANS PREDICTED TWO YEARS AGO THAT THE AIDS
EPIDEMIC WOULD CONTINUE TO GROW AND SPREAD WELL INTO
THE 1990S ... AND I'M AFRAID THEY WERE RIGHT.

AS OF LAST YEAR WE HAD -117,000 CASES WITH 70,000 DEATHS.

AND 1 MILLION CARRYING THE VIRUS. SOME OF THEM KNOW

THEY HAVE IT AND SOME DON'T, BUT THEY ARE ALL INFECTIOUS

TO OTHER PEOPLE THROUGH INTIMATE SEXUAL CONTACT OR

SHARING PARAPHANALIA WHEN THEY SHOOT DRUGS.

THAT'S WHY I PREFER TO SPEAK OF HIV INFECTION --NOT AIDS--BECAUSE IT HELPS FOCUS ON THE ENORMITY OF THE PROBLEM.

ALMOST HALF THE NUMBER OF PEOPLE WHO WERE REPORTED
AS NEW CASES OF AIDS JUST LAST YEAR HAVE ALREADY DIED.

SO, EVEN THOUGH WE DON'T KNOW EVERYTHING ABOUT THIS DISEASE, WE DO KNOW ONE THING FOR CERTAIN:

IF YOU HAVE AIDS, YOUR CHANCES OF SURVIVING THE NEXT TWO OR THREE YEARS ARE NOT VERY GOOD. BUT YOUR CHANCES OF SURVIVING ANY LONGER THAN THAT ARE ALMOST NIL.

IN FEBRUARY 1986, PRESIDENT REAGAN ASKED THE SURGEON

GENERAL TO PREPARE A REPORT TO THE AMERICAN PEOPLE ON

AIDS.

THE REPORT HAD TO GIVE THE FACTS ABOUT AIDS AND TELL
PEOPLE HOW TO PROTECT THEMSELVES FROM GETTING IT.

AFTER 8 MONTHS OF LISTENING TO ALL SHADES OF OPINION -LEFT, RIGHT, AND CENTER -- FROM A BROAD CROSS-SECTION OF
OUR SOCIETY, I RELEASED MY REPORT DIRECTLY TO THE
AMERICAN PEOPLE AT AN OCTOBER 1986 PRESS CONFERENCE.

AIDS IS TRANSMITTED IN FOUR WAYS ... AND IN <u>ONLY</u> FOUR WAYS:

* THE FIRST WAY IS MOST COMMON ROUTE OF
TRANSMISSION IS SEXUAL INTERCOURSE ... MOSTLY BUT NOT
EXCLUSIVELY ANAL INTERCOURSE, WHICH OCCURS MOST
FREQUENTLY AMONG HOMOSEXUALS AND BISEXUAL MALES.
THIS ACCOUNTS FOR ABOUT TWO-THIRDS OF ALL CASES OF AIDS.
HOWEVER, AIDS IS TRANSMITTED THROUGH HETEROSEXUAL
INTERCOURSE. AND EVEN THOUGH THE STATISTICAL INCIDENCE
OF HETEROSEXUAL TRANSMISSION IS LOWER, IT IS JUST AS
FATAL. DON'T FOOL AROUND.

- * AIDS IS ALSO TRANSMITTED INTO THE BLOOD OF
 INTRAVENOUS DRUG ADDICTS WHO USE THE NEEDLES AND
 SYRINGES OF <u>OTHER</u> ADDICTS ALREADY INFECTED WITH AIDS
 VIRUS.
- * THE VIRUS CAN ALSO BE TRANSMITTED FROM AN AIDSINFECTED MOTHER TO HER INFANT DURING PREGNANCY OR AT
 THE TIME OF DELIVERY.
- * AND FINALLY, AIDS CAN BE TRANSMITTED THROUGH
 TRANSFUSED BLOOD OR BLOOD PRODUCTS. BUT THIS DANGER IS
 NOW ALMOST STATISTICALLY INSIGNIFICANT.

AND, THERE ARE FOUR KEY ASPECTS OF THE DISEASE OF AIDS:

ONE, THAT IT'S SPREADING ...

TWO, THAT IT'S FATAL...

THREE, THAT WE DON'T HAVE A CURE YET ...

AND FOUR, THAT IT'S SPREAD MAINLY BY CERTAIN SPECIFIC BEHAVIORS INVOLVING SEX AND/OR DRUGS.

THESE FOUR ASPECTS MAKE THE AMERICAN PEOPLE VERY EDGY
ABOUT AIDS. AND THAT'S CERTAINLY UNDERSTANDABLE.
BUT THE FACT REMAINS THAT YOU HAVE TO MAKE A CONSCIOUS
DECISION TO CARRY OUT A SPECIFIC FORM OF PERSONAL
BEHAVIOR BEFORE YOU EXPOSE YOURSELF TO THE AIDS VIRUS.
DON'T DO IT.

THE ONLY WEAPON WE HAVE AGAINST THIS DISEASE IS EDUCATION, EDUCATION, AND MORE EDUCATION.

AND TO DEAL WITH THE GROWING NUMBER OF AMERICANS

DYING OF AIDS, WE WILL NEED COMPASSION, COMPASSION, AND

MORE COMPASSION.

AIDS MAY BE THE MOST DEADLY DISEASE ON THE HORIZON, THE MOST UNIQUE CHALLENGE TO US, BUT IT IS NOT THE GREATEST KILLER OR THE GREATEST BURDEN ON THE HEALTH CARE SYSTEM. THAT NOTORIETY GOES TO SMOKING-RELATED DISEASE.

I'VE SAID IT MANY TIMES BEFORE: "SMOKING IS THE CHIEF,
SINGLE, AVOIDABLE CAUSE OF DEATH IN OUR SOCIETY AND THE
MOST IMPORTANT PUBLIC HEALTH ISSUE OF OUR TIME" (CEK)

THE EVIDENCE AGAINST SMOKING BUILDS EVERY YEAR, AND THE AMERICAN PEOPLE ARE BELIEVING IT.

AS YOUR SURGEON GENERAL I RELEASED 8 ANNUAL REPORTS ON SMOKING. THEY HAVE DEALT WITH CANCER, CARDIOVASCULAR DISEASE, CANCER IN WOMEN, SMOKING IN THE WORKPLACE, CHRONIC OBSTRUCTIVE LUNG DISEASE, INVOLUNTARY SMOKING OR WHAT IS SOMETIMES CALLED "PASSIVE SMOKING," AND THE ADDICTIVE QUALITIES OF NICOTINE.

EACH ONE HAS ITS OWN SPECIFIC AND IMPRESSIVE DATA BASE.

TODAY, THE SMOKING-AND-HEALTH RESEARCH BASE IS STILL GROWING. IT IS COMPRISED OF MORE THAN 60,000 PUBLISHED ARTICLES. AGAIN, THE VAST MAJORITY QUITE CLEARLY REINFORCES THE FACT THAT CIGARETTE SMOKING IS THE SINGLE MOST IMPORTANT FACTOR BEHIND ACUTE AND CHRONIC MORBIDITY AND PREMATURE MORTALITY AMONG ADULTS.

AS THIS RESEARCH BASE EXPANDED, SO DID OUR EFFORTS TO EDUCATE THE PUBLIC ... TO GET THOSE WHO SMOKE, TO STOP ... AND THOSE WHO DON'T SMOKE, TO NEVER START.

IN 1984, I WAS PERSONALLY SO CONVINCED BY THE DATA

ACCUMULATED THUS FAR THAT I CALLED UPON MY FELLOW

CITIZENS TO MAKE THE UNITED STATES A "SMOKE-FREE SOCIETY

BY THE YEAR 2000."

WE'LL ACHIEVE THAT SMOKE-FREE SOCIETY BECAUSE WE WILL GRADUATE A CLASS FROM HIGH SCHOOL IN 2000 THAT WILL HAVE HAD 12 YEARS OF ANTI-SMOKING HEALTH MESSAGES. IT STARTED THE YEAR BEFORE LAST, IN THE FIRST GRADE. TEACHING THAT YOUNG WILL WIN.

FEW THINGS BRINGS ME AS MUCH SATISFACTION AS THE DRAMATIC DECREASE IN SMOKERS DURING THE LAST 8 YEARS, FROM 33 PERCENT TO 26 PERCENT.

BUT THERE IS MORE TO DO.

SMOKING IS STILL THE SINGLE MOST DEADLY "HABIT" ...

ASSOCIATED WITH HIGHER MORTALITY AND ILLNESS THAN

DRUGS, AUTOMOBILES, AND AIDS <u>COMBINED</u>. ALL THE AIDS

PATIENTS WHO HAVE DIED SINCE WE KNEW ABOUT THE DISEASE,

8 YEARS, EQUALS THE SMOKING DEATHS OF ONLY 4 MONTHS.

SMOKING IS THE ROOT CAUSE OR THE MOST SIGNIFICANT CAUSE FOR ABOUT 1,000 DEATHS <u>A DAY</u> OF HEART DISEASE, CANCER, AND STROKE, THE 3 LEADING KILLERS OF AMERICANS.

RECENT STUDIES DEMONSTRATE A DEFINITE INCREASE IN YOUR HEART ATTACK RISK, EVEN IF YOU SMOKE VERY LITTLE.

SOME 50 MILLION AMERICANS STILL SMOKE, MAKING A MAJOR IMPACT ON THE NATIONAL HEALTH BUDGET ... AND THEIR OWN PERSONAL AND FAMILY HEALTH BUDGETS.

BUT THE TOBACCO INDUSTRY HAS NOT GIVEN UP

I DOUBT THAT YOU CAN FIND A MORE HEAVY-HANDED, OBTUSE,
IMPOLITIC, AND UNTRUTHFUL GROUP OF CORPORATIONS
ANYWHERE.

ALMOST FROM MY FIRST DAY IN OFFICE, THE INDUSTRY

REMINDED ME AGAIN AND AGAIN -- AND NOT VERY SUBTLY

EITHER -- THAT I OUGHT TO GET OFF MY ANTI-SMOKING "HOBBY-HORSE," AS ONE TOBACCO LOBBYIST CALLED IT, AND PAY

ATTENTION TO OTHER, ALLEGEDLY MORE IMPORTANT PUBLIC

HEALTH MATTERS.

ECHOES OF THEIR COMPLAINTS WERE RELAYED TO ME FROM
THE WHITE HOUSE, THE CONGRESS, AND EVEN FROM MEMBERS
OF THE PRESS, WHO HAVE OFTEN BEEN THE GULLIBLE CARRIERS
OF THE INDUSTRY'S DISASTROUS MESSAGE.

I ALSO READ THEIR DECEPTIVE, FULL-PAGE ADVERTISEMENTS
THAT LIFTED MENDACITY AND HALF-TRUTHS TO A NEW AND
HIGHER LEVEL OF FAUSTIAN ART.

TO BE PERFECTLY HONEST, I DID NOT ASSUME THE POSITION OF SURGEON GENERAL WITH THE CLEAR INTENTION OF BEING SUCH AN ACTIVE OPPONENT OF TOBACCO AS I HAVE BEEN. BUT THEN I BEGAN TO STUDY IN SOME DEPTH THE INCONTROVERTIBLE TRUTHS ABOUT THE HEALTH HAZARDS OF SMOKING.

AND I MUST TELL YOU THAT I WAS AT FIRST DUMBFOUNDED AND THEN PLAINLY FURIOUS AT THE TOBACCO INDUSTRY FOR ATTEMPTING TO OBFUSCATE AND TRIVIALIZE THIS EXTRAORDINARILY IMPORTANT PUBLIC HEALTH INFORMATION.

HOW COULD THE TOBACCO INDUSTRY DARE TO DISMISS AS

UNFOUNDED AND UNPROVEN THE ABSOLUTELY CLEAR

CONNECTION BETWEEN SMOKING AND HEART DISEASE ...

BETWEEN SMOKING AND DEATHS FROM STROKE ... BETWEEN

SMOKING AND CANCER OF THE LUNG, THE MOUTH, THE

ESOPHAGUS, AND OF THE STOMACH ... AND BETWEEN SMOKING

AND A DOZEN OR MORE SERIOUS, DEBILITATING, EXHAUSTING,

EXPENSIVE, AND HUMILIATING DISEASES?

HOW COULD THEY DARE TO DO THAT? I WONDERED. THE

ANSWER WAS ... THEY JUST <u>DID</u>. AND THEY FLAUNTED THEIR

ABILITY TO BUY THEIR WAY INTO THE MARKETPLACE OF IDEAS

AND POLLUTE IT WITH THEIR FALSE AND DEADLY INFORMATION.

SO OUR EDUCATION CAMPAIGNS, OUR SELF-HELP GROUPS MUST CONTINUE THEIR GOOD WORK. WE MUST GUARD AGAINST COMPLACENCY, AND INTENSIFY OUR EFFORTS TO ELIMINATE THE GREATEST CAUSE OF PREVENTABLE DISEASE AND DEATH AFFLICTING OUR SOCIETY.

YOU ALL CAN DO SOMETHING.

IF YOU SMOKE, OF COURSE, STOP.

AND GET THE HELP YOU NEED TO STOP. THERE ARE MANY GOOD AND PROVEN CESSATION PROGRAMS.

IF YOU DON'T SMOKE --THANK YOU-- BUT SOMEONE CLOSE TO YOU DOES, HELP HER OR HIM TO STOP.

AND THEN TAKE ON THE TOBACCO COMPANIES IN YOUR OWN COMMUNITY.

A GOOD PLACE TO START IS THE VENDING MACHINES THAT HOOK OUR KIDS ON CIGARETTES.

HERE IS ANOTHER EXAMPLE OF THE CODDLED CIGARETTE COMPANIES.

IT IS ILLEGAL TO SELL BOTH ALCOHOL AND CIGARETTES TO MINORS. THAT IS BECAUSE ALCOHOL AND NICOTINE ARE THE TWO MAJOR LEGAL ADDICTING DRUGS IN OUR SOCIETY.

WE WOULD NEVER TOLERATE SELLING ALCOHOLIC BEVERAGES IN VENDING MACHINES, BUT SOMEHOW WE TOLERATE CIGARETTE VENDING MACHINES.

LOOK AT THE LAWS DEALING WITH SELLING CIGARETTES TO MINORS.

OUR NATION'S CAPITAL, WITH ALL THE HOOPLA ABOUT FIGHTING DRUGS, CAN FINE AN OFFENDING MERCHANT WHO SELLS CIGARETTES TO A MINOR ONLY \$2. ACROSS THE POTOMAC, IN VIRGINIA, THE FINE GOES ALL THE WAY TO \$25. IT'S A PITIFUL TESTIMONY TO OUR CRIMINAL TOLERATION OF SELLING CIGARETTES TO MINORS.

YET, GETTING A KID ADDICTED TO NICOTINE SEEMS TO BE ONE OF THE MOST CERTAIN WAYS TO CUT SHORT A PROMISING LIFE.

THE CIGARETTE VENDING MACHINES SHOULD BE THE NEXT TARGET IN THE CRUSADE AGAINST SMOKING.

THERE IS ANOTHER ISSUE CONCERNING TOBACCO.

OUR SOCIETY IS NOT THE ONLY ONE AFFECTED.

THE BATTLE AGAINST SMOKING WORLDWIDE IS OUR BUSINESS

TOO.

IT IS OUR CONCERN NOT ONLY BECAUSE OF A GENERAL
INTEREST IN COMBATING DISEASE AND DEATH, BUT ALSO
BECAUSE IT AFFECTS OUR ABILITY TO COUNTER THE PLOYS OF
THE TOBACCO INDUSTRY, AND IT IS PART OF OUR WAR ON
DRUGS.

THE DECLINE IN TOBACCO COMPANY EARNINGS FROM THE SALE
OF CIGARETTES TO AMERICANS IS BEING OFFSET BECAUSE
CIGARETTE COMPANIES ARE EXPLOITING MARKETS OVERSEAS.

IN ONE OF THE MOST DISGRACEFUL EXAMPLES OF PRIVATE ENTERPRISE GONE AMOK, THE CIGARETTE INDUSTRY IS FOCUSING ITS HIGH-POWERED MARKETING ATTENTION ON THE UNPROTECTED CITIZENS OF THIRD-WORLD NATIONS IN ASIA, AFRICA, AND SOUTH AMERICA.

AS A RESULT, THOSE NATIONS ARE NOW BEGINNING TO EXPERIENCE THE SAME RISE IN SMOKING-RELATED DISEASES THAT WE EXPERIENCED A GENERATION AGO ... HEART DISEASE, STROKE, AND CANCER OF THE LUNG, MOUTH, ESOPHAGUS, AND STOMACH.

AND AS AN AMERICAN CITIZEN, I AM APPALLED BY THIS

CORPORATE BEHAVIOR OF AMERICAN COMPANIES AND,

FURTHER, I AM SHOCKED BY THE OUR OWN GOVERNMENT'S

SUPPORT OF SUCH BEHAVIOR.

THE ALARMING THING ABOUT THIS HABIT IS THAT, WHEN IT INVADES A NEW MARKET, IT DOES SO WITH IMMENSE SPEED AND IMPACT. ACCORDING TO THE WORLD HEALTH ORGANIZATION, BETWEEN 1971 AND 1981 CIGARETTE CONSUMPTION INCREASED IN ASIA AND LATIN AMERICA AT A RATE 30 PERCENT AHEAD OF THE RATE OF POPULATION INCREASE ... IN AFRICA, IT ROSE 77 PERCENT AHEAD OF THE RISE IN POPULATION.

IN 10 OF 15 ASIAN COUNTRIES, AMERICAN CIGARETTES WERE THE MOST COMMON KIND IMPORTED.

BUT THOSE AMERICAN CIGARETTES ARE A LITTLE DIFFERENT
OVERSEAS: FOR ONE THING, THEY DON'T CARRY THE SURGEON
GENERAL'S WARNING. AND FOR ANOTHER, MANY AMERICAN
CIGARETTES MANUFACTURED FOR EXPORT HAVE A HIGHER TAR
CONTENT AND ARE, THEREFORE, EVEN MORE DANGEROUS THAN
THE LOWER-TAR, FULLY-LABELLED PRODUCTS SOLD HERE IN
THE UNITED STATES.

NOW, LET ME MAKE SURE YOU UNDERSTAND WHAT I JUST SAID.

I SAID THAT SOME AMERICAN CIGARETTE MANUFACTURERS -- AS

KNOWLEDGEABLE AS I AM, CONCERNING THE HEALTH RISKS OF

SMOKING -- KNOWINGLY PRODUCE A MORE HARMFUL

CIGARETTE FOR EXPORT THAN THEY PRODUCE FOR DOMESTIC

CONSUMPTION.

JUST A LITTLE MORE THAN A YEAR AGO, 15 ASIAN COUNTRIES

REPORTED THAT COMMUNICABLE DISEASE WAS NO LONGER THE

NUMBER ONE PUBLIC HEALTH MENACE IN ASIA.

TODAY, THE TOP THREE CAUSES OF DEATH IN ASIA ARE -- CAN
YOU GUESS? -- THE SAME THREE SMOKING-RELATED CAUSES OF
DEATH THAT PREVAIL HERE IN THE UNITED STATES: HEART
DISEASE, CANCER, AND STROKE.

OUR EXPORT OF TOBACCO PRODUCTS IS A MORAL OUTRAGE.

AND IT IS ALSO FOOLISH.

WE MUST CONVINCE OUR GOVERNMENT THAT THERE IS NO SENSE IN PLANNING FOR THE LONG-TERM ECONOMIC HEALTH OF A FOREIGN SOCIETY AND PROVIDING THAT SOCIETY WITH FOREIGN AID ON THE ONE HAND, IF THE PHYSICAL HEALTH OF THE PEOPLE OF THAT SOCIETY IS FUNDAMENTALLY ENDANGERED DURING THAT SAME LONG TERM.

I DO NOT BELIEVE THE UNITED STATES WILL EVER AGAIN BE A GOOD MARKET FOR TOBACCO PRODUCTS.

THE CURVE IS GOING DOWN AND ACCELERATING.

AND I FEEL QUITE GOOD ABOUT THE ROLE I BELIEVE I PLAYED IN BRINGING ABOUT THIS MARKET CHANGE.

WE HAVE BEATEN THE CIGARETTE INDUSTRY ON ITS OWN HOME
TURF ... BUT WE'VE DRIVEN THEM TO SCOUR THE REST OF THE
EARTH FOR NEW VICTIMS.

IT IS THE HEIGHT OF HYPOCRISY FOR THE UNITED STATES, IN
OUR WAR AGAINST DRUGS, TO DEMAND THAT FOREIGN NATIONS
TAKE STEPS TO STOP THE EXPORT OF COCAINE TO OUR
COUNTRY WHILE AT THE SAME TIME WE EXPORT NICOTINE, A
DRUG JUST AS ADDICTIVE AS COCAINE, TO THE REST OF THE
WORLD.

THE PROBLEM OF DRUGS IN AMERICA IS SO LARGE AND SO
OFTEN DISCUSSED THAT I DON'T NEED TO ADD MY VOICE TO ALL
THOSE WHO POINT OUT THE URGENCY ABOUT DOING
SOMETHING ABOUT THE DRUG CRISIS.

IT IS A COMPLICATED PROBLEM, TOUCHING NOT ONLY UPON PUBLIC HEALTH, BUT ALSO INVOLVING LAW, POLITICS, AND EVEN THE MILITARY.

MY ONE COMMENT ON THIS ISSUE WILL MAKE A MEDICAL COMPARISON.

NOT TOO LONG AGO THE MEDICAL COMMUNITY SPENT A GOOD

DEAL OF TIME AND EFFORT TRYING TO DECIDE WHICH WAS THE

BEST TREATMENT FOR CANCER: SURGERY, RADIATION,

CHEMOTHERAPY, ETC.

PEOPLE DIVIDED THEMSELVES INTO CAMPS, EACH PLUGGING ITS OWN SOLUTION.

EVENTUALLY IT BECAME CLEAR THAT THE SMARTEST STRATEGY
WAS A MULTIPLE STRATEGY, EMPLOYING ALL OF THEM,
EMPHASIZING ONE OR THE OTHER FOR CERTAIN PROBLEMS.
IN THE SAME WAY, PERHAPS TO MUCH TIME HAS BEEN SPENT
TRYING TO FIND THE BEST WAY TO FIGHT DRUGS: ELIMINATE
THE SUPPLY, REDUCE THE DEMAND, INTERDICTION,
INCARCERATION, SOLVING BASIC SOCIAL PROBLEMS. WE NEED
ALL THESE, IN A MULTIPLE STRATEGY, AND THE WISDOM TO
DECIDE WHICH TO EMPHASIZE WHEN.

AND TO RAISE THE MONEY TO PAY FOR THE WAR ON DRUGS, WE COULD RAISE THE EXCISE TAX ON THE TWO LEGAL DRUGS, NICOTINE AND ALCOHOL.

THE HIGHER PRICE MIGHT PUT CIGARETTES OUT OF THE RANGE
OF THOUSANDS OF TEENAGE PURCHASERS, SAVING THEM FROM
A LIFE OF NICOTINE ADDICTION.

I HAVE FOCUSED MY ATTENTION ON THE WORKSITE SINCE

LEAVING GOVERNMENT. ONE QUARTER OF THE 20-40 YEAR OLDS

IN THE AMERICAN WORK FORCE TOOK DRUGS IN THE LAST YEAR.

ONE OF 8 TOOK DRUGS IN THE LAST MONTH. YET THESE MEN

AND WOMEN HAVE JOBS, SPOUSES, FAMILY AND I THINK A

BETTER BASE FOR CHANGE WHEN GIVEN AMNESTY AND A WAY

OUT THEN TO DECLARE WAR ON A CITY LIKE WASHINGTON, D.C.

MY FINAL APPEARANCE BEFORE CONGRESS AS SURGEON

GENERAL FOCUSED ON A DRUG TOPIC THAT FIGURED LARGELY

IN MY FINAL YEAR IN OFFICE,

ONE THAT IS HIGH ON THE AMERICAN LIST OF CONCERNS:

ALCOHOL ABUSE, ESPECIALLY ALCOHOL-IMPAIRED DRIVING.

ALCOHOL IS A TOXIC, POTENTIALLY ADDICTIVE DRUG, THE GREATEST KILLER OF AMERICAN YOUNG PEOPLE BETWEEN 16 AND 24.

ALCOHOL ABUSE COSTS ANNUALLY 100,000 DEATHS AND \$136 BILLION IN ECONOMIC LOSSES.

AN ESTIMATED 18 MILLION ADULT AMERICANS HAVE MEDICAL, SOCIAL AND PERSONAL PROBLEMS RELATED TO THE USE OF ALCOHOL, AS DO SEVERAL MILLION ADOLESCENTS FOR WHOM ALCOHOL IS AN ILLEGAL DRUG.

TENS OF MILLIONS OF OTHER ADULTS AND YOUTHS ARE
AFFECTED BY THE ALCOHOL PROBLEMS OF FAMILY MEMBERS,
FRIENDS, AND WORK ASSOCIATES.

THESE FIGURES DO NOT INCLUDE THE COSTS OF GRIEF AND HUMAN SUFFERING. HOW MANY DEFICITS OF THIS KIND CAN THE COUNTRY AFFORD?

I WAS LED TO TACKLE THE ISSUE OF DRUNK DRIVING BECAUSE OF THE URGENCY OF THE CRISIS.

I COULD SEE THE URGENCY IN THE MANY LETTERS THAT CAME
IN TO MY OFFICE FROM STATE AND LOCAL OFFICIALS OF EVERY
AREA OF THE COUNTRY. I ALSO RECEIVED THOUSANDS OF
CARDS, LETTERS, AND TELEGRAMS FROM SURVIVING FAMILY
MEMBERS GRIEVING OVER THE LOSS OF A LOVED ONE ...
SOMEONE KILLED BY A DRUNK DRIVER.

THE URGENCY WAS CLEAR FROM THE SENTIMENT EXPRESSED BY

99 UNITED STATES SENATORS AND FROM A UNANIMOUS HOUSE

OF REPRESENTATIVES, WHO ASKED ME TO TAKE ON THIS ISSUE

AND DO WHATEVER I COULD TO BRING IT UNDER CONTROL.

TIME IS NOT ON OUR SIDE.

HENCE, WE CAN EXPECT THAT 1990 -- LIKE 1989 AND 1988 BEFORE

IT --WILL BE A YEAR IN WHICH 24,000 MORE AMERICANS WILL

HAVE DIED ON OUR HIGHWAYS IN ALCOHOL-RELATED

ACCIDENTS.

AND MANY THOUSANDS MORE WILL HAVE BEEN KILLED IN ACCIDENTS THAT ARE <u>DRUG-RELATED</u>.

DURING MY TIME AT THIS MICROPHONE THREE OF OUR

CITIZENS WILL BE KILLED BY A DRUNK DRIVER. 534,000 PEOPLE

ARE INJURED IN ALCOHOL-RELATED TRAFFIC CRASHES EACH

YEAR.

WHEN THE VEHICULAR WRECKAGE IS TOWED AWAY, THE HUMAN WRECKAGE IS LEFT BEHIND -- THE PERMANENT BRAIN DAMAGE, THE SPINAL CORD INJURIES, THE LOST OR PERMANENTLY DEFORMED LIMBS, THE BLINDNESS AND THE IMPOTENCE ... THE LIFETIMES CRIPPLED WITH DISABILITY AND HAUNTED BY RECURRENT NIGHTMARES OF HOW IT ALL HAPPENED.

TENS OF THOUSANDS OF DEATHS ... HUNDREDS OF THOUSANDS
OF INJURIES ... THOSE ARE NUMBING STATISTICS. BUT THEY ARE
ALSO MORE THAN JUST STATISTICS.

THEY ARE REAL PEOPLE ... REAL HUMAN LIVES.

UNFORTUNATELY, A DISPROPORTIONATE NUMBER OF HIGHWAY
VICTIMS ARE YOUNG PEOPLE ... YOUNG MEN AND WOMEN
BETWEEN THE AGES OF 15 AND 24. NO OTHER COMPARABLE AGE
COHORT HAS SUCH A RECORD OF DEATH AND INJURY ON THE
HIGHWAY.

AND THIS AGE GROUP, BY ITSELF, ACCOUNTS FOR OVER 8,000
ALCOHOL-RELATED FATALITIES, OR ABOUT A THIRD OF ALL
FATALITIES EACH YEAR IN WHICH ALCOHOL IS IMPLICATED.

WITH ALCOHOL-IMPAIRED DRIVING, AS WITH SMOKING, THE ISSUES ARE MANY AND COMPLICATED, AND EVEN SMALL STEPS TOWARD ALLEVIATING THE PROBLEM TRIGGER STRONG EMOTIONS AND VEHEMENT CONTROVERSY.

FOR EXAMPLE, DURING MY FINAL YEAR AS SURGEON GENERAL I INVITED TO A WORKSHOP ON DRUNK DRIVING REPRESENTATIVES FROM THE NATIONAL ASSOCIATION OF BROADCASTERS, THE AMERICAN ASSOCIATION OF ADVERTISING AGENCIES, AND THE ASSOCIATION OF NATIONAL ADVERTISERS.

al

THEY ALL DECLINED, YET CRITICIZED STRONGLY THE WORKSHOP AND ITS RECOMMENDATIONS.

THE NATIONAL BEER WHOLESALERS ASSOCIATION WENT SO FAR
AS TO FILE A LAWSUIT FOR A RESTRAINING ORDER FOR THE
WORKSHOP.

ALCOHOL-IMPAIRED DRIVING MUST BE SEEN AS A PUBLIC
HEALTH AND SAFETY PROBLEM, RATHER THAN AS AN ECONOMIC
AND MORAL ISSUE, AND OUR PRIMARY CONCERN MUST BE WITH
PRESERVING HUMAN LIVES.

OUR GOAL MUST BE THE NATIONAL <u>TOTAL UNACCEPTABILITY</u> OF DRIVING AFTER USING ALCOHOL OR OTHER DRUGS. THE VERY ENORMITY OF OUR LOSSES DEMANDS NO LESS OF A RESPONSE.

AFTER THE WORKSHOP I INFORMED THE CONGRESS,

MANUFACTURERS, THE VOLUNTARY AGENCIES, ADVERTISERS,

AND LAW ENFORCEMENT AGENCIES WHAT EACH COULD DO TO

STOP THE CARNAGE. LET ME HIGHLIGHT ONE MESSAGE.

WE NEED TO PAY SPECIAL ATTENTION TO THE PERNICIOUS MESSAGES OF ALCOHOL <u>ADVERTISING</u>.

OUR CONCERN SHOULD ALSO INCLUDE TOBACCO ADVERTISING.

AS WE MOUNT OUR NATIONAL WAR ON DRUGS,

THERE IS SOMETHING PERVERSE ABOUT OUR CONDONING

ADVERTISEMENTS FOR THE GREATEST KILLER-DRUGS: NICOTINE

AND ALCOHOL.

INDEED, IT IS STRANGE THAT WE SHOULD EVEN NEED TO ADDRESS THIS SUBJECT.

IT IS STRANGE TO ATTEMPT TO HAVE A RATIONAL DISCOURSE ABOUT AN IRRATIONAL FLUKE OF HISTORY.

PEOPLE WOULD DENOUNCE ANY ATTEMPT TO ENCOURAGE

AMERICANS TO CONSUME SUBSTANCES LIKE TOBACCO OR

ALCOHOL, BECAUSE THEY ARE CLEARLY ASSOCIATED WITH

DISEASE, DISABILITY AND DEATH.

IF TOBACCO AND ALCOHOL WERE NOW FOR THE FIRST TIME
BEING TESTED FOR POPULAR CONSUMPTION, THE REGULATORY
AGENCIES WE ENTRUST WITH WATCHING OUT FOR OUR HEALTH
WOULD DISALLOW THEIR USE.

BUT FROM THE BEGINNING, AMERICAN TOBACCO HAS ENJOYED GOVERNMENT PROTECTION AND CODDLING, DESPITE ITS SINISTER ASSOCIATIONS, FIRST WITH SLAVERY, AND LATER WITH CANCER AND HEART DISEASE. ONLY THE GROTESQUE ECONOMIC POWER OF THE INTERNATIONAL TOBACCO COMPANIES CAN SUSTAIN THIS OUTRAGE, AS THEY USE ECONOMIC BLACKMAIL TO INTIMIDATE PUBLISHERS, GOVERNMENTS, AND BROADCASTERS.

SIMILARLY, THE FAILURE OF PROHIBITION IN THE 1920S HAS

MADE AMERICANS SHRINK FROM TAKING THE STEPS ANY

RATIONAL SOCIETY WOULD TAKE TO REDUCE OR ELIMINATE THE

INCALCULABLE PERSONAL AND SOCIAL COST OF ALCOHOL

ABUSE.

IT IS UNCONTESTABLE: UNDENIABLE HARM TO INDIVIDUALS AND TO OUR NATION COMES FROM ALCOHOL AND TOBACCO.

ALTHOUGH NO ONE CLAIMS THAT ADVERTISING ALONE IS THE CAUSE FOR DRINKING AND SMOKING, IT DOES NOT MAKE SENSE THAT TOBACCO AND ALCOHOL ADVERTISERS WOULD SPEND BILLIONS ON SLICK, GLAMOROUS, SEXY ADVERTISING IF IT DID NOT PAY OFF.

CURRENT ALCOHOLIC BEVERAGE ADVERTISING IS INCREASINGLY
TARGETED AT YOUNG PEOPLE AND MINORITIES, AND OFTEN

DEPICTS ALCOHOL CONSUMPTION AS A NORMAL AND
GLAMOROUS ACTIVITY WITHOUT NEGATIVE CONSEQUENCES.

DRINKING IS FREQUENTLY SHOWN IN ASSOCIATION WITH HIGHRISK ACTIVITIES AND LINKED TO ATHLETIC, SOCIAL, AND SEXUAL
SUCCESS. THAT'S THE WRONG MESSAGE.

AND STUDIES MAKE CLEAR THE RELATIONSHIP AMONG
TEENAGERS BETWEEN HEAVY EXPOSURE TO ALCOHOL ADS,
HEAVY DRINKING, AND ENGAGING IN RISKY ACTIVITIES, LIKE
DRIVING WHILE UNDER THE INFLUENCE OF ALCOHOL.

AND IT IS YOUNG PEOPLE WHO HEAR THIS MESSAGE.

AMERICAN CHILDREN SEE ABOUT 100,000 BEER COMMERCIALS

BETWEEN THE TIME THEY ARE TODDLERS UNTIL 18.

56% OF U.S. HIGH SCHOOL STUDENTS BEGIN DRINKING IN THE

9TH GRADE OR EARLIER. MANY DRINK HEAVILY.

HALF OF 10TH GRADERS AND ONE THIRD OF 8TH GRADERS
SURVEYED SAID THEY HAD RIDDEN AT LEAST ONCE IN LAST
MONTH WITH DRIVER WHO HAD USED ALCOHOL OR DRUGS
BEFORE DRIVING.

DRUNK-DRIVING IS NOT THE ONLY PROBLEM.

ALCOHOL ABUSE IS A CULPRIT ASSOCIATED WITH CHILD AND SPOUSE ABUSE, WITH DROWNINGS, WITH FETAL ALCOHOL SYNDROMES, WITH CANCER, WITH HEART DISEASE.

BUT THE ALCOHOL INDUSTRY FORCES ITS TENTACLES OF

CORRUPTION AND INFLUENCE INTO THE VERY AGENCIES THAT

SHOULD BE PROTECTING US. DURING RECENT HEARINGS ABOUT

A BILL THAT WOULD REQUIRE ROTATING HEALTH WARNINGS ON

BEER WINE AND LIQUOR ADS, MUCH LIKE THOSE ON

CIGARETTES, THE FEDERAL TRADE COMMISSION CHAIRWOMAN,

JANET D. STEIGER, SAID THAT THE F.T.C. WOULD NOT BACK THE

WARNINGS BECAUSE THE "EVIDENCE" WAS INCONCLUSIVE.

THE WOMAN WAS OBVIOUSLY BOUGHT OFF, SINCE THE EVIDENCE IS CONCLUSIVE.

TEENAGERS TESTIFYING BEFORE NATIONAL COMMISSION ON ALCOHOL SAID REPEATEDLY THAT A HIGH PERCENT OF TEENS BEGIN TO DRINK BEER BECAUSE OF THE ADS.

IF YOU THINK THERE IS NO ADVERTISING OF CIGARETTES ON TELEVISION, LISTEN TO THIS. CIGARETTE ADS ON MOST SPORTS STADIUMS GET FULL PLAY ON TV, AS THE CAMERAS SEEM TO PAN AROUND THE FIELD JUST TO FIND THEM. ON NBC'S 1989 GRAND PRIX IN 93 MINUTES OF TV THERE WERE 4997 IMAGES OF MARLBORO SIGNS, 519 OF MARLBORO BILLBOARDS, 249 OF THE MARLBORO CAR. FOR 49% OF THE WHOLE TIME OR 46 MINUTES THE BRAND NAME MARLBORO WAS ON THE SCREEN.

ALTHOUGH ONE OF THE MOST GRATIFYING CHANGES DURING MY TENURE AS SURGEON GENERAL WAS THE DECLINE IN CIGARETTE SMOKING IN GENERAL, I AM ALARMED BY THE CONTINUED RISE OF SMOKING IN CERTAIN GROUPS: YOUNG PEOPLE, WOMEN, AND MINORITIES.

NOT COINCIDENTALLY, THESE THREE GROUPS HAVE BEEN THE TARGETS OF SPECIAL ADVERTISING BY THE TOBACCO COMPANIES.

ADVOCATES FOR WOMEN, CHILDREN, AND MINORITIES ARE INCENSED BY THIS PATRONIZING AND MANIPULATIVE MARKETING.

CIGARETTE FIRMS MANIPULATE MINORITIES, WOMEN, AND
YOUNG PEOPLE BECAUSE THESE PEOPLE HAVE THE STRONGEST
ASPIRATIONS TO CHANGE THEIR STATUS.

SO THESE ADS ASSOCIATE SMOKING WITH MAKING IT...

IN THE WHITE, OR ANGLO, OR MALE, OR ADULT WORLD.

THEY ASSOCIATE SMOKING WITH A HIGHER ECONOMIC STATUS ...

(WHEN REALLY HIGHER INCOME GROUPS ARE NOW SMOKING LESS).

TOBACCO ADVERTISERS ASSOCIATE SMOKING --CONTRARY TO ALL EVIDENCE-- WITH ROBUST ACTIVITY, ATHLETICS, SOCIAL ACCEPTABILITY, SUCCESS, OUTDOOR LEISURE, AND EVEN GOOD HEALTH.

TOBACCO-SPONSORED SPORT EVENTS IMPROPERLY LINK
SMOKING WITH ATHLETIC SUCCESS, INSTEAD OF WITH ITS
HEALTH-CRIPPLING RESULTS.

AT THIS POINT THE CIGARETTE COMPANIES, ALCOHOLIC
BEVERAGE COMPANIES--AND SOME BROADCASTERS-- TROT OUT
THE OLD LINE THAT THEIR ADVERTISING IS INTENDED ONLY TO
ENFORCE BRAND LOYALTY, AND TO GET CONSUMERS TO SWITCH
TO THEIR BRAND.

NO ONE REALLY BELIEVES THAT.

BRAND CHANGERS FORM ONLY 10% OF THE MARKET.

THE REAL PURPOSE OF CIGARETTE ADVERTISING TO IS HOLD ON TO THOSE SMOKERS ALREADY HOOKED --ADDICTED-- AND TO ATTRACT NEW ONES.

IT WORKS.

RECENT STUDIES CONFIRM THAT INCREASED ADVERTISING
BRINGS ABOUT A HIGHER DEMAND FOR CIGARETTES IN
GENERAL, NOT JUST FOR THE BRANDS ADVERTISED.
THE STORY FOR ALCOHOL ADVERTISING IS MUCH THE SAME.

LIKE TOBACCO ADVERTISERS, ALCOHOL ADVERTISERS ARE

ALWAYS ATTEMPTING TO INCREASE THEIR TOTAL MARKET, TO

LURE NEW CONSUMERS TO THEIR PRODUCTS.

THIS MEANS COMPETING, NOT JUST WITH OTHER ALCOHOLIC BEVERAGES, BUT WITH ALL BEVERAGES, INCLUDING SODA, JUICES, AND THE LIKE.

THAT'S WHAT IS BEHIND THE TREND TOWARD WINE COOLERS,
LITE BEER, CREAMY LIQUEURS, ETC.AND, SURE ENOUGH, WINE
AND BEER CONSUMPTION HAS MOVED UP STEADILY SINCE THIS
NEW HEAVY ADVERTISING BEGAN ON TV AND RADIO.

THE TIME HAS COME FOR THE AMERICAN PEOPLE TO PROTECT
THEIR CHILDREN --AND THEMSELVES-- FROM THE THREAT TO
THEIR HEALTH IN THE GUISE OF ADVERTISING.

A <u>BUSINESS WEEK/LOUIS HARRIS POLL INDICATED THAT 57% OF</u>
THE PUBLIC FAVORS TOTAL BAN ON BROADCAST ALCOHOL
ADVERTISING.

IF VOLUNTARY RESTRICTIONS ARE NOT SOON ADOPTED,
ADVERTISING BANS WILL BE MANDATED BY CONGRESS IN
RESPONSE TO PUBLIC DEMAND.

A BAN ON ADVERTISING FOR <u>BOTH</u> ALCOHOL AND TOBACCO WILL HAVE ALMOST IMMEDIATE POSITIVE RESULTS FOR THE HEALTH OF THE AMERICAN PEOPLE.

OR, IF WE DON'T HAVE A BAN, WE'LL USE COUNTER-ADVERTISING, WITH HEALTH MESSAGES. COUNTER-ADVERTISING IS SO SUCCESSFUL, THAT IN THE PAST TOBACCO ADVERTISERS HAVE PULLED THEIR ADS OFF TV, RATHER THAN HAVE COUNTER-ADS INFORM AMERICANS ABOUT THE REAL CONSEQUENCES OF SMOKING.

WHEN TOBACCO ADVERTISING HAS BEEN RESTRICTED, HERE AND ABROAD, SMOKING HAS DECLINED, THEREFORE AFFECTING POSITIVELY THE HEALTH OF THE SOCIETY.

WE HAVE SEEN THE STEADY DECLINE IN SMOKING SINCE TV ADS WERE BANNED.

WE CAN SEE SIMILAR RESULTS IN OTHER COUNTRIES.

NEW ZEALAND DISCOVERED THAT BANS ON TOBACCO

PROMOTION ARE FOLLOWED BY A SMOKING DECLINE, AND THAT

TOTAL BANS CAUSE A SMOKING DECLINE 4 TIMES FASTER THAN

IN COUNTRIES WITH PARTIAL BANS.

SIMILARLY A MULTI-FACETED CAMPAIGN AGAINST ALCOHOL ADS IN SCANDINAVIAN COUNTRIES LED TO A 20% DECLINE IN DRINKING, AND A 30% DECLINE IN HIGH SCHOOL DRINKING.

IN CALLING FOR RESTRICTIONS ON TOBACCO AND ALCOHOL ADVERTISING

I STAND ON COMMON SENSE AND PROVEN HEALTH STUDIES.

I DON'T NEED TO HIDE BEHIND THE FIRST AMENDMENT.

I DON'T NEED TO USE OUR CONSTITUTION AS A SMOKE SCREEN.

AND THE "FREE SPEECH" ARGUMENT USED BY TOBACCO AND

ALCOHOL ADVERTISERS IS A SMOKE SCREEN.

YOU DON'T SEE THESE PEOPLE OUT IN FRONT ON OTHER FIRST AMENDMENT ISSUES.

FREE SPEECH HAS NEVER BEEN AN UNLIMITED RIGHT:
WE ALL KNOW YOU CAN'T YELL "FIRE" IN A CROWDED THEATRE.

THE FIRST AMENDMENT WAS NOT INTENDED TO ALLOW LIES TO BE FOISTED ON THE PUBLIC.

MOST CIGARETTE AND ALCOHOL ADVERTISING IS LIES.

IT ASSOCIATES WITH ROMANCE, GLAMOUR, ATHLETICS, SUCCESS SUBSTANCES WHICH INSTEAD LEAD TO DISABILITY AND DEATH.

FIRST AMENDMENT PROTECTION IS NOT EXTENDED TO SPEECH ENCOURAGING ILLEGAL ACTIVITY.

TOBACCO AND ALCOHOL ADVERTISERS DEPEND UPON REACHING YOUNG PEOPLE.

MOST OF THOSE WHO SMOKE OR DRINK, BEGAN BEFORE THEY WERE TWENTY, OR EVEN 15.

IN OTHER WORDS, THE CONTINUED STRENGTH OF THE TOBACCO
AND ALCOHOL MARKET DEPENDS ON THOSE TO WHOM THE
PRODUCTS CANNOT BE LEGALLY SOLD.

THEREFORE, RESTRICTIONS ON TOBACCO AND ALCOHOL

ADVERTISING MEET THE CONSTITUTIONAL TEST IN AT LEAST

TWO WAYS:

1. IT IS APPROPRIATE TO BAN COMMERCIAL SPEECH THAT IS MISLEADING OR FRAUDULENT.

AND

2. IT IS APPROPRIATE TO BAN COMMERCIAL'SPEECH RELATED TO ILLEGAL ACTIVITY.

FOR ALL THEIR TALK ABOUT "FREEDOM", TOBACCO AND ALCOHOL INTERESTS ARE GREAT ENEMIES OF FREEDOM.

FAR FROM BELIEVING IN FREE SPEECH, TOBACCO AND ALCOHOL
ADVERTISERS USE THEIR ECONOMIC CLOUT TO FORCE
PUBLISHERS NOT TO PRINT ARTICLES ABOUT THE REAL
CONSEQUENCES OF SMOKING AND DRINKING.
CIGARETTE AND ALCOHOL ADVERTISING, FAR FROM ALLOWING
FREE CHOICE, ACTUALLY UNDERMINE FREE CHOICE. NICOTINE
ADDICTS AND ALCOHOLICS DO NOT ENJOY FREE CHOICE.

FINALLY, LET'S BE UP-FRONT ABOUT THE SPECIAL CHALLENGE FACING TOBACCO ADVERTISERS:

MOST TOBACCO USERS WOULD RATHER NOT SMOKE.

AS MANY AS 90% WISH TO QUIT.

MANY TOUGH IT OUT, BREAK THEIR ADDICTION, AND SUCCEED IN QUITTING.

THE ADVERTISERS NEED TO REPLENISH THE DIMINISHING
SUPPLY OF TOBACCO USERS.

AND, --REMEMBER THIS-- 1,000 SMOKERS WILL GIVE UP SMOKING TODAY.

....THEIR FUNERALS WILL BE HELD IN THE NEXT THREE DAYS.

ANOTHER 5000 QUIT EACH DAY BECAUSE THEY KNOW BETTER.

SO, JUST TO KEEP RUNNING IN PLACE THE CIGARETTE COMPANIES MUST HOOK 6000 NEW SMOKERS PER DAY.

WE ARE A VIOLENT SOCIETY.

IN 1870 THE UNITED STATES CONGRESS PASSED A LAW CREATING
AN ORGANIZATION TO PREVENT CRUELTY TO ANIMALS.

VERY QUICKLY, EVEN IN RELATIVELY SMALL TOWNS,

ORGANIZATIONS BEGAN TO PROTECT ALL MANNER OF FURRY OR
FEATHERED CREATURES.

IT IS A SAD COMMENTARY ON OUR SOCIETY TO ADMIT THAT IT

TOOK AN ADDITIONAL 100 YEARS TO CREATE OUR FIRST SHELTER

FOR BATTERED WOMEN.

VIOLENCE IS NOT ONLY A <u>PROBLEM</u> FOR AMERICAN SOCIETY,

BUT ALSO IT HAS BECOME A <u>PLAGUE</u>, A RAPIDLY EXPANDING

<u>HEALTH</u> PROBLEM.

MY INTEREST IN THIS ISSUE BEGAN IN A CURIOUS WAY.

IN 1984, I WAS ASKED TO ADDRESS A MEETING ON TELEVISION VIOLENCE.

THE GOVERNMENT HAD BEEN FUNDING RESEARCH IN T.V.

VIOLENCE FOR THE PAST 20 YEARS AND SPEECHES ON THE

SUBJECT BY THE SURGEON GENERAL WERE RATHER ROUTINE ...

BUT I BEGAN TO WONDER IF SOMEHOW OUR PREOCCUPATION
WITH T.V. VIOLENCE MIGHT ACTUALLY BE PREVENTING US FROM
SEEING THE LARGER AND MUCH MORE SERIOUS PROBLEM OF
REAL VIOLENCE IN OUR SOCIETY.

EVEN A QUICK GLANCE AT THE PROBLEM REVEALED ITS STAGGERING DIMENSIONS.

REPORTS FROM AROUND THE NATION INDICATED THAT AS MANY
AS 4 MILLION CHILDREN WERE VICTIMS OF ABUSE AND NEGLECT.

TO OUR SHAME WE HAD HIDDEN THIS NATIONAL TRAGEDY.

MANY OF THOSE YOUNG VICTIMS HAVE BEEN PUNCHED ...
SLAPPED ... THROWN ... AND BEATEN WITH FISTS, CLUBS, AND
OTHER WEAPONS.

ADULTS DO THAT TO CHILDREN.

FOR CENTURIES ADULTS HAVE INJURED CHILDREN ... AND HAVE LIED ABOUT IT ...

AND OTHER ADULTS HAVE HEARD THOSE LIES AND THEN MERELY TURNED AWAY.

THE STATISTICS FOR WOMEN ARE EQUALLY ALARMING.

ESTIMATES VARY, BUT WE KNOW THAT FROM 1 TO 3 MILLION

WOMEN IN THE UNITED STATES ARE BATTERED AND ASSAULTED

EACH YEAR BY THEIR HUSBANDS OR PARTNERS. MANY ARE

RAPED.

THESE WOMEN VICTIMS OF ASSAULT ARE PERMANENTLY

INJURED -- NOT JUST PHYSICALLY BUT ALSO MENTALLY --- WHILE

SOME OF THEM LOSE THEIR LIVES.

BATTERY IS THE SINGLE MOST SIGNIFICANT CAUSE OF INJURY
TO WOMEN IN THIS COUNTRY.

ONE IN EVERY FIVE WOMEN SEEN IN HOSPITAL EMERGENCY
ROOMS IS A VICTIM OF PERSONAL INJURY CAUSED BY SPOUSE
ABUSE.

REMEMBER, BEHIND THESE COLD NUMBERS, PERCENTAGES, AND STATISTICS ARE REAL PEOPLE, OUR NEIGHBORS, OUR FAMILY MEMBERS, OUR FELLOW CITIZENS.

THE CONSEQUENCES ARE ENORMOUS:

LOSS OF SELF-ESTEEM,

INABILITY TO WORK PRODUCTIVELY AND TO CARE FOR
CHILDREN, PSYCHIATRIC PROBLEMS, ALCOHOL AND DRUG
DEPENDENCE.

STUDIES HAVE SHOWN THAT BATTERED WOMEN ARE FOUR TO FIVE TIMES MORE LIKELY THAN NON-BATTERED WOMEN TO REQUIRE PSYCHIATRIC TREATMENT.

MANY SUFFER FROM ANXIETY, INCREASED LEVELS OF HOSTILITY,

OBSESSIVE-COMPULSIVE SYMPTOMS, AND AGORAPHOBIA - FEAR

OF OPEN SPACES. SOME COMMIT SUICIDE.

MOREOVER, STUDIES HAVE SHOWN THAT WOMEN WHO ARE

ABUSED ARE EIGHT TIMES MORE LIKELY TO ABUSE THEIR

CHILDREN THAN WOMEN WHO ARE NOT ABUSED. THESE ABUSED

CHILDREN THEN OFTEN BECOME ABUSERS THEMSELVES.

WE REALIZE THAT WE DON'T HAVE GOOD STATISTICS IN THIS

DIFFICULT AREA. BUT, IF ANYTHING, THESE NUMBERS ARE MUCH

TOO LOW.

WE ESTIMATE, FOR EXAMPLE, THAT FOR EVERY ADULT VICTIM

OF VIOLENCE COUNTED BY THE POLICE AND THE F.B.I., AS MANY

AS THREE ADDITIONAL ADULT VICTIMS PASS THROUGH

HOSPITAL EMERGENCY ROOMS OR COMMUNITY CLINICS AND

ARE MISSED BY THE POLICE ALTOGETHER.

INTERPERSONAL FAMILY VIOLENCE IS AN OVERWHELMING
MORAL, ECONOMIC, AND PUBLIC HEALTH BURDEN THAT OUR
SOCIETY CAN NO LONGER BEAR. IN THIS COUNTRY, NO MAN HAS
A LICENSE TO BEAT A WOMAN ... AND GET AWAY WITH IT. AND
NO WOMAN IS OBLIGED TO ACCEPT A BEATING ... AND SUFFER
BECAUSE OF IT.

I WON'T GO INTO ALL THE DETAILS OF HOW WE FACED THIS

PROBLEM, BUT MUCH HAS BEEN ACCOMPLISHED. NOT ENOUGH.

THERE IS STILL MUCH TO DO.

WE SAY WE ARE A CIVILIZED SOCIETY.

ALL RIGHT, LET'S ACT LIKE ONE.

WE AMERICANS CAN GET SLIGHTLY ZANY ABOUT FOOD -LIKE DURING THE APPLE SCARE OF '89: SCHOOLS BANNED
"APPLES FOR THE TEACHERS"--AND FOR THE STUDENTS,

HOUSEWIVES PITCHED OUT JARS OF APPLESAUCE,

AND THEN THERE WAS THAT FRANTIC MOTHER IN UPSTATE NEW

YORK

WHO INSISTED THAT THE STATE POLICE INTERCEPT HER

DAUGHTER'S SCHOOL BUS, BECAUSE SHE HAD PACKED AN APPLE
IN THE LITTLE GIRL'S LUNCH BOX BEFORE HEARING NEWS

REPORTS ABOUT ALAR.

SOME PEOPLE THINK THAT ALL MAN-MADE SUBSTANCES SHOULD BE REMOVED FROM OUR FOOD SUPPLY, AND THAT EVERYTHING OCCURRING IN NATURE IN BENEFICIAL. THEY INSIST ON BANNING ALL PESTICIDES. FORTUNATELY THE LARGE CHAIN STORES HAVE NOT JUMPED ON THIS BANDWAGON, ALTHOUGH SOME SMALL STORES HAVE PLEDGED TO SELL NOTHING EXCEPT FOODS UNTREATED BY PESTICIDES. NOT ONLY WILL THIS LEAVE THEM WITH ROTTEN FOOD, BUT ALSO THEY WILL FAIL TO PROTECT THE CONSUMER AGAINST MOLD SUCH AS APHATOXIN (??) WHICH IS LETHAL, AND OCCURS, FOR EXAMPLE, ON CORN.

PEOPLE WHO ARE SO WORRIED ABOUT PESTICIDES FAIL TO

REALIZE THAT THE CANCER RATES HAVE DROPPED OVER THE

LAST 40 YEARS: STOMACH CANCER HAS DROPPED MORE THAN

75%, WHILE RECTAL CANCER DROPPED MORE THAN 65%.

THE ONLY CANCER RATE THAT IS GOING UP IS AN

ENVIRONMENTAL CANCER, CIGARETTE- INDUCED LUNG CANCER.

MUCH OF THE PUBLIC CONCERN ABOUT CARCINOGENS IN

PESTICIDES IS MISPLACED.

THE CHAIRMAN OF THE DEPARTMENT OF BIOCHEMISTRY AT

BERKELEY, AND AUTHOR OF IMPORTANT ADVANCES IN

ONCOLOGY BELIEVES THAT THE FDA IS CORRECT IN SAYING

THAT AVERAGE AMERICAN CONSUMES 45 MICROGRAMS OF

POSSIBLE CARCINOGENIC MAN-MADE PESTICIDE RESIDUES

EVERY DAY. BUT HE POINTS OUT THAT THERE ARE 500

MICROGRAMS OF NATURALLY OCCURRING CARCINOGENS IN 1

CUP OF COFFEE, 185 MICROGRAMS OF NATURAL CARCINOGENS IN

A SLICE OF BREAD, 2000 MICROGRAMS OF NATURE'S

CARCINOGENS IN COCA-COLA.

UNTIL RECENTLY, AMERICANS THOUGHT ABOUT FOOD IN TERMS
OF TASTE AND COST.

NOW THEIR CHIEF CONCERNS ARE HEALTH AND SAFETY.

AMERICANS ENJOY THE SAFEST FOOD SUPPLY IN THE WORLD,
BUT IT TAKES ONLY AN ISOLATED INCIDENT OR RUMOR TO MAKE
THIS NATION PANIC ABOUT THE SAFETY OF OUR ENTIRE FOOD
SUPPLY.

THE AMERICAN PEOPLE WANT ASSURANCE THAT EVERYTHING THEY EAT IS "SAFE".

THE QUESTION ABOUT THE FOOD SUPPLY IS NOT "IS IT SAFE?"

--FEW THINGS IN LIFE CAN BE GUARANTEED "SAFE" -
BUT "IS IT SAFE ENOUGH?"

IN THE FOOD SUPPLY --AS IN ALL OTHER PUBLIC HEALTH

QUESTIONS-- WE NEED BETTER UNDERSTANDING OF <u>RISK</u> AND

HAZARD --AND THE DIFFERENCE BETWEEN RISK AND HAZARD.

THERE IS RISK IN ALMOST EVERYTHING WE DO,

SO WE NEED TO CONCENTRATE ON THE DIFFERENCE BETWEEN

EXPOSURE TO A HAZARD AND TRUE RISK.

RESIDUE IN FOOD IS ACCEPTABLE. PUBLIC HEALTH OFFICIALS,
HOWEVER, OPERATE ON THE PRINCIPLE THAT MERE EXPOSURE
TO A SUBSTANCE DOES NOT NECESSARILY CREATE A HAZARD.

IT IS THE COMBINATION OF TOXICITY AND EXPOSURE THAT

CREATES THE RISK. WE STILL HAVE A LONG WAY TO GO IN

EDUCATING THE AMERICAN PEOPLE ABOUT THIS DIFFERENCE

BETWEEN EXPOSURE AND RISK.

ONE OF OUR PROBLEMS IN STRIKING THE RIGHT BALANCE
BETWEEN MANAGING RISK AND MANAGING FEAR IS NOT A
SCIENTIFIC OR HEALTH PROBLEM, BUT A LEGISLATIVE ONE:
A WELL-INTENDED MEASURE --THE DELANEY CLAUSE-- WITH
UNFORESEEN NEGATIVE CONSEQUENCES.

WHEN CONCERN FIRST SURFACED ABOUT THE PRESENCE OF CARCINOGENS IN FOODS AND DRUGS, CONGRESS PASSED THE DELANEY CLAUSE TO PROTECT THE AMERICAN PEOPLE FROM UNKNOWN DANGERS.

JUST TO BE ON THE SAFE SIDE, THE LAW STIPULATED THAT IF

ANY SUBSTANCE CAUSED ANY CANCER IN ANY ANIMAL, IT WOULD

BE BANNED FOR HUMAN CONSUMPTION.

THE LAW DID NOT BOTHER TO DISTINGUISH THE SIZE OF THE DOSE, THE TOXICITY OF THE SUBSTANCE, THE FORM OF CANCER, THE KIND OF ANIMAL, ETC.

SINCE THEN, THE RESEARCH COMMUNITY HAS BECOME MORE SOPHISTICATED, DETERMINING THAT SOME CARCINOGENS IN ANIMALS DO NOT HAVE THAT EFFECT IN HUMANS.

ALSO, SOME CARCINOGENS PEOPLE WOULD LIKE TO BAN IN ADDITIVES ARE FOUND NATURALLY IN FOODS.

FURTHER STUDIES HAVE INDICATED THAT THE DAMAGE DONE TO CELLS IN SOME ANIMALS IN SOME TESTS IS DUE, NOT TO CARCINOGENIC SUBSTANCE, BUT TO THE SHEER TOXICITY OF THE SIZE OF THE DOSE.

GIVING A LABORATORY RAT A DOSE THE EQUIVALENT TO MY

DRINKING A BATHTUB FULL OF THE SAME SUBSTANCE HAS BEEN

QUESTIONED AS A VALID SCIENTIFIC EXPERIMENT.

I THINK THE DELANEY CLAUSE NEEDS TO BE AMENDED TO REFLECT CURRENT SCIENCE.

A NUMBER OF RECENT SCARES SHOWED US HOW QUICKLY

CONCERN TURNS TO PANIC.

AS A PUBLIC HEALTH OFFICIAL, I APPLAUD THE AMERICAN

CONCERN FOR A HEALTHFUL DIET. SUSTAINED PUBLIC INTEREST

IN DIET AND HEALTH IS BOUND TO MAKE A DIFFERENCE,

BECAUSE DIET IS FUNDAMENTAL TO THE HEALTH OF THE

AMERICAN PEOPLE.

INDEED, THE AMERICAN COUNCIL ON SCIENCE AND HEALTH
INDICATES THAT TWO-THIRDS OF ALL DEATHS IN AMERICA ARE
DIRECTLY OR INDIRECTLY RELATED TO DIET.

BUT PUBLIC HEALTH OFFICIALS BECOME FRUSTRATED WHEN

CONCERN ABOUT DIET LEADS TO CONFUSION ABOUT THE SAFETY

OF THE FOOD SUPPLY.

SOMETIMES BEING TOO CONCERNED ABOUT DIET CAN BE COUNTER-PRODUCTIVE.

WORRYING ABOUT TRACES OF CHEMICALS IN A FEW FOODS MAY

BE KEEPING MANY AMERICANS FROM EATING THE WELL
ROUNDED AND NUTRITIONAL DIETS THEY NEED.

WHILE WE ARE TALKING ABOUT FOOD, A FEW WORDS ABOUT THE CHOLESTEROL ISSUE.

THE CHOLESTEROL BALLOON HAS BEEN PRICKED AND IS DEFLATING.

LET'S BE VERY CLEAR ABOUT CHOLESTEROL.

IT IS A RISK FACTOR FOR CORONARY HEART DISEASE.

IT IS HOWEVER, ONLY ONE OF SEVERAL RISK FACTORS, AND MOST SCIENTISTS THINK THE OTHERS, SUCH AS SMOKING AND HIGH BLOOD PRESSURE ARE MORE IMPORTANT AND EASIER TO CONTROL. BECAUSE CHOLESTEROL IS MANUFACTURED IN THE BODY NATURALLY, DIET DOES NOT HAVE THE DIRECT RELATIONSHIP TO BLOOD LEVELS THAT MANY MISLED LAYMEN ASSUME.

THEN TOO, THE STATED RELATIONSHIP BETWEEN CORONARY
HEART DISEASE AND CHOLESTEROL BLOOD LEVELS FALLS OFF
FOR WOMEN WHEN THEY GET OVER 55 AND MEN WHEN THEY
GET OVER 60. HEREDITY IS A PROMINENT FACTOR. IN SUMMARY
IT SEEMS THAT ADVICE CONCERNING CHOLESTEROL DIET IN
RELATIONSHIP TO CORONARY HEART DISEASE HAS BEEN GIVEN
TO MORE PEOPLE THAN THOSE TO WHOM THE INFORMATION IS
PERTINENT. A SEGMENT OF THE POPULATION MAY HAVE BEEN
MISLED INTO THINKING DIETARY CHANGES CAN ACCOMPLISH
MORE THAN IS POSSIBLE.

F

THE NUMBERS ARE INTERESTING. WHILE MANY STUDIES SHOW
THAT THERE IS A REDUCTION IN THE NUMBER OF HEART
ATTACKS ASSOCIATED WITH THE LOWERING OF CHOLESTEROL,
THERE IS NO EVIDENCE THAT THERE IS AN ACCOMPANYING
REDUCTION IN THE DEATH RATE FROM CORONARY HEART
DISEASE. SO, ALTHOUGH THE QUALITY OF LIFE MIGHT BE
IMPROVED, THE DEATH RATE IS STILL THE SAME.
THERE IS NO DOUBT THAT SOME HAVE BENEFITTED FROM THE
CHOLESTEROL HEALTH INITIATIVE, BUT GREATER NUMBERS
HAVE BEEN TREATED THAN NECESSARY OR PRUDENT.

IF YOU'RE OVER 50 AND A FEMALE; OR OVER 60 AND A MALE, AND YOUR CHOLESTEROL IS 200 MILLIGRAMS OR LESS, CHECK WITH YOUR DOCTOR IN 5 YEARS, AND EAT A NORMAL DIET. IF YOUR CHOLESTEROL IS BETWEEN 200 AND 240, IF OTHER RISK FACTORS ARE NOT UNDER CONTROL, THEN YOU SHOULD CONTROL THEM. AND PERHAPS REDUCE YOUR CHOLESTEROL. IF YOU HAVE MORE THAN 240 CHOLESTEROL, THEN YOU OUGHT TO TALK TO YOUR DOCTOR ABOUT TAKING YOU TOTALLY IN HAND, AND ALTHOUGH HE MAY PUT YOU ON A LOWERED CHOLESTEROL DIET, HE SHOULD HOT DO SO WITHOUT CUTTING DOWN ON OTHER RISK FACTORS. IT IS CRAZY TO GO ON A LOW CHOLESTEROL DIET AND COMMITTEE TO SMOKE.

F

(some of this material same as in smoking part of speech)

NOW, I'D LIKE TO TAKE A FEW MINUTES TO TALK ABOUT INTERNATIONAL HEALTH.

FOR MOST OF MY SURGICAL CAREER, I WAS INVOLVED IN
INTERNATIONAL HEALTH WORK. BUT IT WAS ONLY DURING MY
TENURE AS SURGEON GENERAL OF THE U.S. PUBLIC HEALTH
SERVICE, THAT I HAD THE OPPORTUNITY TO WORK CLOSELY
WITH THE LEADERSHIP AND STAFF OF THE WORLD HEALTH
ORGANIZATION.

THE EXPERIENCE HAS REINFORCED MANY TIMES OVER MY
BELIEF THAT

W.H.O. IS NOT ONLY AN AGENCY WHOSE EXISTENCE IS ESSENTIAL

TO WORLD MEALTH, BUT IS ALSO AN ORGANIZATION WHOSE

ACCOMPLISHMENTS OVER THE PAST 40 YEARS HAVE EVEN

EXCEEDED THE GREAT HOPES THAT ATTENDED ITS BIRTH.

AND IT HAS BEEN DRIVEN BY A POWERFUL CONCEPT ... "THAT

HEALTH, GOOD OR ILL, COULD NEVER AGAIN BE PURELY A

NATIONAL PHENOMENON."

THE HEALTH STATUS OF ALL THE PEOPLE OF THE WORLD -WHETHER THEY LIVE IN DEVELOPED OR DEVELOPING
COUNTRIES -- AFFECTS ALL OTHERS. IT WAS THEREFORE IN THE
INTEREST OF ALL NATIONS TO WORK TOGETHER TO ADDRESS
THE TOTALITY OF WORLD HEALTH PROBLEMS.

PROGRESS MAS BEEN MADE IN THE FOUR DECADES DURING
WHICH WALO. EVOLVED FROM A TECHNICAL ASSISTANCE
AGENCY, PRIMARILY CONCERNED WITH COMMUNICABLE
DISEASES CONTROL, TO A PARTNER OF ALL NATIONS IN THE
SUPPORT OF NATIONAL GOALS FOR HEALTH FOR ALL.

- O WE MAVE IMPROVED OUR HEALTH CARE SYSTEMS AND
 MADE MEALTH SERVICES AVAILABLE TO A DEGREE
 UNKNOWN 40 YEARS AGO.
- O TODAY, THANKS TO A VERY ACTIVE AND SUCCESSFUL W.H.O.

 EXPANDED PROGRAM ON IMMUNIZATION, THERE IS EXCELLENT

 VACCINATION COVERAGE AGAINST POLIOMYELITIS, DIPHTHERIA,

 TETANUS, WHOOPING COUGH, MEASLES, AND TUBERCULOSIS.

AS WE LOOK AT OUR WORLD TODAY, WE SEE THAT ENORMOUS

PROGRESS MAS BEEN MADE IN THE FOUR DECADES DURING

WHICH WALLO. EVOLVED FROM A TECHNICAL ASSISTANCE

AGENCY, PRIMARILY CONCERNED WITH COMMUNICABLE

DISEASES CONTROL, TO A PARTNER OF ALL NATIONS IN THE

SUPPORT OF NATIONAL GOALS FOR HEALTH FOR ALL.

AND, AT THE REQUEST OF MEMBER NATIONS, W.H.O. HAS NOW LAUNCHED A SPECIAL EFFORT TO ELIMINATE POLIO EVERYWHERE. POLIO MAY WELL BECOME THE SECOND DISEASE TO BE ERADICATED THROUGH THE EFFORTS OF MANKIND, FOLLOWING SMALLPOX ON THE ROAD TO EXTINCTION.

ORAL REHYDRATION THERAPY IS WELL ON ITS WAY TO
BECOMING ANOTHER SUCCESS STORY. IT IS BECOMING SO
EFFECTIVE THAT THE LIVES OF COUNTLESS INFANTS AND
CHILDREN ARE BEING SPARED. THE THERAPY, OF COURSE, IS
BASED ON A SIMPLE SOLUTION OF WATER, SUGAR, AND SALTS ...
A FORMULA DEVISED BY W.H.O. SCIENTISTS.

THE WORK ON MALARIA ALSO CONTINUES TO HOLD PROMISE
THAT THIS DISEASE, TOO, WILL ONE DAY BE CONQUERED. FROM
ITS CREATION, W.H.O. HAS TARGETED THIS DISEASE. AND
DESPITE THE DIFFICULTIES OF MALARIA CONTROL, WE CAN
REMAIN OPTIMISTIC ABOUT THE FUTURE.

THESE SUCCESS STORIES ARE IMPRESSIVE. BUT IF ANYTHING,
THEY SHOULD SERVE AS A STIMULUS TO US TO DO BETTER.
THEY MUST NOT BE AN EXCUSE FOR COMPLACENCY.

WE KNOW ALL TOO WELL THAT VICTORY OVER DISEASE IS OFTEN COUNTER-BALANCED BY THE APPEARANCE OF NEW THREATS AND NEW DISEASES.

WE ARE NOW EXPERIENCING THIS WITH AIDS AS A WORLDWIDE EPIDEMIC.

WORLDWIDE, 8 TO 10 MILLION PEOPLE ARE ALREADY INFECTED WITH AIDS, CONSISTENT WITH THE GRIM PREDICTION MADE BY W.H.O. THAT BY THE YEAR 2000, 25 TO 20 MILLION PEOPLE WOULD BE INFECTED BY THE HIV VIRUS. IN SOME PLACES --SUB-SAHARAN AFRICA, ASIA, AND LATIN AMERICA-- THE EPIDEMIC IS SPREADING EVEN MORE RAPIDLY THAN FORECAST, REFLECTING THE CONTINUING INCREASES IN HETEROSEXUAL TRANSMISSION.

AIDS THREATENS EVERY NATION AND PRESENTS AN

UNPRECEDENTED CHALLENGE TO INTERNATIONAL PUBLIC

HEALTH. EACH COUNTRY AFFECTED THAT CONFRONTS THIS NEW

HEALTH PROBLEM MAY DISCOVER IT MAY NEED TO RESPOND

WITH RESOURCES OF SO GREAT A MAGNITUDE THAT IT CAN

DEVASTATE THE VERY HEALTH SYSTEM IT IS TRYING TO

STRENGTHEN.

IN DEVELOPING NATIONS, AIDS TENDS TO IMPACT MOST OFTEN
ON THE MOST PRODUCTIVE MEMBERS OF SOCIETY: THE
BREADWINNERS IN THE PRIME OF THEIR LIVES HENCE,
DEVELOPING NATIONS HIT BY AIDS COULD LOSE AN
IRREPLACEABLE GENERATION OF ENGINEERS, HEALTH
WORKERS, TEACHERS, AND GOVERNMENT OFFICIALS, AS WELL AS
WORKERS IN AGRICULTURE, INDUSTRY, AND TRADE.

AIDS HAS THE POTENTIAL TO DEVASTATE A DEVELOPING COUNTRY'S PLANS FOR DEVELOPMENT.

A TOP PRIORITY FOR W.H.O. AND THE NATIONS OF THE WORLD IS
TO MAKE THE WORLD'S BLOOD SUPPLY SAFE FOR TRANSFUSION.

THE GLOBAL FIGHT AGAINST AIDS WILL TAKE MANY YEARS, AND IT WILL REQUIRE POLITICAL AND HEALTH LEADERS ALIKE TO HAVE THE STRENGTH OF COMMITMENT NECESSARY TO MAKE DIFFICULT DECISIONS, TO STAND FIRM AGAINST UNREASONABLE FEAR, AND TO MAINTAIN THE CONSISTENCY AND UNITY OF ACTION THAT ARE ABSOLUTELY VITAL FOR A GLOBAL FIGHT AGAINST THIS GLOBAL THREAT.

LIKE AIDS, THE HEALTH CONSEQUENCES OF SMOKING HAVE
BECOME AN INTERNATIONAL PROBLEM. AND, I'M SORRY TO
ADMIT, THE UNITED STATES HAS PLAYED A SINISTER ROLE IN
THIS TRAGEDY.

- THE FACT OF THE MATTER IS THAT THE CIGARETTE COMPANIES -
- AMERICAN COMPANIES AND THEIR EUROPEAN COUNTERPARTS -
- ARE EXPLOITING THE UNPROTECTED MARKETS OF THE THIRD WORLD: ASIA, SOUTHEAST ASIA, AFRICA, AND CENTRAL AND SOUTH AMERICA.

AND THEY ARE VERY EFFECTIVE, I MIGHT ADD. THEY HAVE
INUNDATED THOSE UNDEVELOPED AND DEVELOPING COUNTRIES
WITH CIGARETTE ADVERTISING AND PROMOTION TO SUCH AN
EXTENT THAT CIGARETTE CONSUMPTION IN THOSE COUNTRIES
IS ON THE RISE.

AND ALSO ON THE RISE ARE THE MORBIDITY AND MORTALITY
RATES FOR SUCH SMOKING-RELATED DISEASES AS STROKE,
HEART DISEASE, AND CANCERS OF THE LUNG, MOUTH,
ESOPHAGUS, AND STOMACH.

AND I MUST ADD THAT THIS EXPORT OF DEATH AND DISEASE HAS
BEEN CARRIED OUT WITH THE SUPPORT OF THE UNITED STATES
GOVERNMENT -- OUR TRADE REPRESENTATIVES, OUR STATE
DEPARTMENT, OUR COMMERCE DEPARTMENT, AND OUR
AGRICULTURE DEPARTMENT.

IT'S NOT A VERY PRETTY STORY. BUT THERE IT IS.

THE ALARMING THING ABOUT THIS HABIT IS THAT, WHEN IT INVADES A NEW MARKET, IT DOES SO WITH IMMENSE SPEED AND IMPACT. ACCORDING TO THE WORLD HEALTH ORGANIZATION, BETWEEN 1971 AND 1981 CIGARETTE CONSUMPTION INCREASED IN ASIA AND LATIN AMERICA AT A RATE 30 PERCENT AHEAD OF THE RATE OF POPULATION INCREASE ... IN AFRICA, IT ROSE 77 PERCENT AHEAD OF THE RISE IN POPULATION.

BUT THOSE AMERICAN CIGARETTES ARE A LITTLE DIFFERENT

OVERSEAS: FOR ONE THING, THEY DON'T CARRY THE SURGEON

GENERAL'S WARNING. AND FOR ANOTHER, MANY AMERICAN

CIGARETTES MANUFACTURED FOR EXPORT HAVE A HIGHER TAR

CONTENT AND ARE, THEREFORE, EVEN MORE DANGEROUS THAN

THE LOWER-TAR, FULLY-LABELLED PRODUCTS SOLD HERE IN

THE UNITED STATES.

NOW, LET ME MAKE SURE YOU UNDERSTAND WHAT I JUST SAID.

I SAID THAT SOME AMERICAN CIGARETTE MANUFACTURERS -- AS

KNOWLEDGEABLE AS I AM, CONCERNING THE HEALTH RISKS OF

SMOKING -- KNOWINGLY PRODUCE A MORE HARMFUL

CIGARETTE FOR EXPORT THAN THEY PRODUCE FOR DOMESTIC

CONSUMPTION.

JUST A LITTLE MORE THAN A YEAR AGO, 15 ASIAN COUNTRIES

REPORTED THAT COMMUNICABLE DISEASE WAS NO LONGER THE

NUMBER ONE PUBLIC HEALTH MENACE IN ASIA.

TODAY, THE TOP THREE CAUSES OF DEATH IN ASIA ARE -- CAN
YOU GUESS? -- THE SAME THREE SMOKING-RELATED CAUSES OF
DEATH THAT PREVAIL HERE IN THE UNITED STATES: HEART
DISEASE, CANCER, AND STROKE.

IN OTHER WORDS, THE TOBACCO EPIDEMIC AND ITS LETHAL CONSEQUENCES HAVE HIT ASIA ... AND -- THANKS TO OUR OWN CIGARETTE INDUSTRY AND THAT OF THE UNITED KINGDOM-- HAVE HIT ASIA <u>HARD</u>.

I DO NOT BELIEVE THE UNITED STATES WILL EVER AGAIN BE A
GOOD MARKET FOR TOBACCO PRODUCTS. THE CURVE IS GOING
DOWN AND ACCELERATING. AND I FEEL QUITE GOOD ABOUT THE
ROLE I BELIEVE I PLAYED IN BRINGING ABOUT THIS MARKET
CHANGE.

I THINK THAT WE HAVE BEATEN THE CIGARETTE INDUSTRY ON ITS OWN HOME TURF ... BUT WE'VE DRIVEN THEM TO SCOUR THE REST OF THE EARTH FOR NEW VICTIMS.

IT IS A TERRIBLE BURDEN FOR THE CONSCIENCE OF THE UNITED STATES. BUT WE WILL HAVE TO BEAR IT UNTIL WE FIND A WAY TO END, ONCE AND FOR ALL, THE PUBLIC HEALTH HAVOC CREATED BY TOBACCO EVERYWHERE IN THE WORLD.

MY ONE REGRET IS THAT I LEFT OFFICE JUST AS THE FIGHT IS
BEGINNING TO RID THE REST OF THE WORLD OF THE SCOURGE
OF TOBACCO AS WELL. IT'S A SHAME, BECAUSE I REALLY FEEL
UP TO IT.

OUR EFFORTS TO HELP THE ENTIRE WORLD ABOUT THE THREATS
POSED BY AIDS AND SMOKING DEPEND ONLY ON EDUCATION
AND PREVENTION.

THAT'S THE NEW --AND OLD-- HEALTH MESSAGE OF THE 1990S.

FORTUNATELY SOME OF US OLDER FOLKS MUST HAVE GOOD GENES, BECAUSE WE'VE LIVED SO MANY YEARS BEFORE THESE HELPFUL HEALTH WARNINGS. WE'VE EATEN FAR TOO MUCH LARD, NEVER JOGGED UNLESS WE WERE LATE FOR A TRAIN, THOUGHT FIBER WAS PART OF CLOTHING NOT DIET, AND WE'VE MADE IT TO OLD-AGE. OF COURSE, IF WE'D KNOWN WE'D LIVE SO LONG, WE'D HAVE TAKEN BETTER CARE OF OURSELVES.

I'VE DECIDED THAT BIRTHDAYS ARE GOOD FOR YOU.

THE PEOPLE WHO HAVE THE MOST OF THEM LIVE LONGEST.

[COUPLE WHO WENT TO HEAVEN.....OAT BRAN]

EXTRA NOTES:

don't be fooled by the statistics war. When you read that, say, the japanese are healthier than we are because only 7.5% Of the japanese population is hospitalized each year, compared to 14.7% Of the us population, remember that the reason for that is the unavailability of hospital beds in japan, where the average stay is 52 days, vs. 6.6 Days in us

humana's budget for artificial heart equal to what society spent on eradicating small pox

numbers of doctors and lawyers. We have 2/3 or worlds lawyers. 40% Of americanrhodes scholars become lawyers. Japan trains 1,000 engineers for every 100 lawyers. We train 1000 lawyers for every 100 engineers.

By 2000, there may be 145,000 excess physicians. These will add costs to the medical practice, by \$300,000 per doctor per yr. There has to be a limit on these two cancerous professions.

Family

need to strengthen family in order to meet health needs of children

[from sullivan speech]:

of the more than 3.5 Million children who enter our schools each year, 14 percent are children of unmarried parents; 40 percent will live in a home torn by divorce before they reach 18; between 25 and 35 percent are "latchkey" children, with no one to greet them when they come home from school.

Breakup of american family has severe health consequences seen in alcohol abuse, illegal drugs, teenage pregnancy, hiv infection, low birth weight,

family structure is biggest difference between black middle class and black underclass.

We need to buttress family, deter teenage sexual activity and teenage pregnancy

attack poverty, to break vicious circle of poverty, family breakdown, more poverty ********

future hospitals must be efficient hubs of care for people brought in over great distances (but, cek: patient transport by copter costs \$35,000 +} ***********

limits to healthcare are not like other limits; no one talks about running out or healthcare like environmentalists warn about running out of oil.

Tobacco price supports: refer to absurdity of many farm programs, born in a different age, now perpetuated without reason, offering price supports that benefit mainly the big farms and agribusiness, not the mythic small farm. And the un-supported commodities somehow make it to market, and the farmers who grow them make a living as well as those who milk the public for price supports.

Limits-to-medicine people may have given up before the battle has started. Many cost-cutting techniques not tried yet. There's a lot of untapped wealth in this, the richest country in the world.

Is 11% of gnp(where we are now) the limit? Or 12%? If we were spending 8%, would 9% be the limit? We are not near the limit.

Although, barring economic recession, foreign policy crises or war, healthcare costs will form the basic issue of the 1990s, health is not the only expense facing us. American industry, the american industrial and transportation infrastructure is living on borrowed time, and also clamors for funds. Meanwhile, the reshaping of our age demography into an hourglass means more young and old dependents, and fewer working americans to foot the bill. ********

Roper poll of fortune 500 execs 95% against national health service, instead, wanted better application of free-market **********

foreign health services like gb, canada, w. Germany grew in accord with societies that had a much stronger tradition of government social leadership, greater traditional deference to society rather than to individual. Temperamentally and culturally not suited to usa.

Should age be a factor in determing allocation of health care? (Now elderly consume far more medical resources than children)

technology

chronic conditions cause 87% or all deaths.

Technology keeps people alive, but a family going through the death of a loved one can look at medical treatment as the enemy

we should not spend our money on things like artificial hearts. We need to spend it to treat heart disease. We would never have conquered polio by spending money on artificial lungs.

Research

budget cuts are curtailing federal support for bio-d=medical research, and only fed. Govt can afford research. But the payoff for govt is highest. As percentage of fed. Expenditures for healthcare, support for research has continued to decline for two decades. Nih: approved but funded nih grants went from 61% in 1975 to 25% in 1990. Low federal salaries drive away scientists from nih. In last 2 years dod r&d has spent more taxpayer money than nih has spent in its entire history.

Nih senior scientists are paid 50% of what they might make in private sector in universities or industry. 28% Fewer senior researchers than a decade ago. Rep. Conte, (ma r) says that soon nih will mean "nobody is here."

Nih research spending: cancer, \$1.45 Billion; hiv \$1.3 Billion; heart disease \$1 billion; diabetes \$.30 Billion; strokes/hypertension \$.20 Billion